

THE GREAT MIMICKER

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UEG Week Copenhagen 2023

Poster

Colorectal

October 15, 2023

A 71-year-old male with abdominal pain and gastrointestinal bleeding was diagnosed with intestinal tuberculosis confirmed by positive M. tuberculosis PCR from ileocecal biopsies after initial negative staining.

KEY POINTS

- Intestinal TB is the sixth most common form of extra-pulmonary TB, accounting for 2-10% of TB worldwide, with the ileocecal region most frequently affected
- The patient had granulomatous colitis on biopsy with a positive IGRA test and calcified lung nodule; repeat colonoscopy showed multiple pleomorphic ulcers on the ileocecal valve and cecum
- PCR testing was positive for M. tuberculosis DNA despite negative Ziehl-Neelsen staining on both initial and repeat biopsies, confirming the diagnosis
- Intestinal TB may present as ulcerative, hyper or ulcero-hypertrophic lesions and in severe forms can include strictures, obstruction, perforation and bleeding
- Diagnosis is challenging due to non-specific symptoms that simulate more common abdominal diseases, earning intestinal tuberculosis the designation of 'The Great Mimicker'

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